

BUILDING DIVISION 200 S. Hamilton Road Gahanna, Ohio 43230 Phone: 614-342-4010 Fax: 614-342-4117

building@gahanna.gov www.gahanna.gov

NTERNAL	PERMIT NO
	MP No. ☐ No Master Permit
	RECD. BY DATE:

ELECTRICAL PERMIT APPLICATION

TO REQUEST AN INSPECTION, CALL 614-342-4010 & PRESS 1, OR SCHEDULE ONLINE AT HTTPS://OHGA.ONLAMA.COM/

☐ COMMERCIAL/MULTI-FAMILY (4 or more units) ☐ RESIDENTIAL (1, 2, 3 FAMILY)					
JOB SITE ADDRESS:	PARCEL ID NO(S).				
Estimated Cost of Entire Project:	Square Footage for Project Scope of Work:				
	Tune of Construction Instrument Construction Translation				
Occupancy Description: (reference <u>Use Group table</u>)- commerical only	Type of Construction: (reference Construction Type table)-commercial only				
DESCRIPTION/SCOPE OF WORK:					
DESCRIPTION, SCOTE OF WORK.					
PROPERTY OWNER Name:					
PROPERTY OWNER Name:					
Commercial Tenant Name (if applicable):	Commercial Tenant Phone No. (if applicable):				
Property Owner Address:					
Property Owner E-mail:	Property Owner Phone No.:				
CONTRACTOR Name:					
Contractor Address:	Gahanna Contractor Registration No.				
	_				
Contractor E-mail:	Contractor Phone No.:				
REGISTERED DESIGN PROFESSIONAL Name:	□ architect □ designer				
REGISTERED DESIGNATION AT TAMES.	□ engineer □ other:				
Registered Design Professional Address:	State License No.				
Registered Design Froressional Address:	Ordio Electise 140.				
Registered Design Professional E-mail:	Registered Design Professional Phone No.:				
kegisierea Design Froressional E-Maii:	kegisierea Design Frotessional Fnone No.:				
CERTIFICATION					
I certify that I am the property owner or the authorized agent representing the owner, and that the information					
on this application is complete and accurate to the best of my knowledge, and that the information contained on					
drawings and text are a true and accurate representation of the dimensions and facts applicable to this request,					
and that there are no deed restrictions that prohibit this work.					
Name:	Title:				
Signature:	Date:				

THIS FORM IS AVAILABLE TO BE SUBMITTED ONLINE: HTTPS://OHGA.ONLAMA.COM



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INTERNAL	AL	PERMIT NO
	INTERN	MP No □ No Master Permit
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ELECTRICAL PERMIT APPLICATION CONTINUED

TC	TO REQUEST AN INSPECTION, CALL 614-342-4010 & PRESS 1, OR SCHEDULE ONLINE AT <u>https://ohga.onlama.com/</u>					
\boxtimes	This application is NOT a permit. No work may begin until a permit is issued.					
\boxtimes		each phase of work is complete, an inspection is required. To request inspection, call 614-342-4010 & , or schedule online at https://ohga.onlama.com/				
\boxtimes	3 sets of	construction documents for commercial; 2 sets for residential to be submitted on, do not resubmit with this application.	I. If submitted with Master Permit			
\boxtimes	1 PDF di	igital copy of construction documents to be submitted. If submitted with Master application.	Permit Application, <u>do not resubmit</u>			
		ox if the project includes use of an assembly of individually listed or labeled	products.			
	Check be	ox if the project includes use of an industrialized unit.				
		AL/MULTI-FAMILY (4 or more units)				
FEES		TYPE OF WORK (check all that apply)				
\$600		☐ NEW CONSTRUCTION/ADDITION/ALTERATION/FIRE REHAB (includes 3 inspections)				
\$150	☐ MINOR LIMITED SCOPE: <u>not</u> to be used with NEW CONSTRUCTION/ADDITION/ALTERATION/FIRE REHAB appropriate examples include: swimming pool above ground; site lighting; building signage; transforme sub panels; safety switches; disconnects; generator; fountain; additional or replacement service; underground installation only (includes 2 inspections)					
	\$200 SWIMMING POOL IN-GROUND (includes 3 inspections)					
\$150)	☐ TEMPORARY ELECTRIC (includes 1 inspection)				
\$150	150/ea. = ADDITIONAL INSPECTIONS: no. of additional inspections purchased (only the specified included number of inspections are allotted with the permit; all additional inspections must be purchased pri to scheduling inspections.) NOTE: there will be no refunds for unused inspections					
\$		TOTAL FEES - payment due at time permit is issued; includes BBS fees. reference: Building & Zoning Fee Schedule	INTERNAL USE: PAID □			
			PAYMENT: RECD. BY/DATE:			
\boxtimes	If scope	of work is determined to be more extensive than represented on this application				
RES	IDENTI <i>A</i>	AL (1, 2, 3 FAMILY)				
FEES		TYPE OF WORK (check all that apply)				
\$500)	☐ NEW CONSTRUCTION/FIRE REHAB (includes 2 inspections)				
\$100)	☐ ALTERATIONS/ADDITIONS (includes 2 inspections)				
		☐ MINOR LIMITED SCOPE: <u>not</u> to be used with NEW CONSTRUCTION/ADDITION/ALTERATION/FIRE REHAB appropriate examples include: swimming pool above ground, additional or replacement service, and generator (includes 1 inspection)				
\$200 SWIMMING POOL IN-GROUND (includes 3 inspections)						
\$150	- Permi Ord Wit Eccorrate (monades i mopesation)					
	150/ea. = ADDITIONAL INSPECTIONS: no. of additional inspections purchased (only the specifie included number of inspections are allotted with the permit; all additional inspections must be purchas to scheduling inspections.) NOTE: there will be no refunds for unused inspections.		spections must be purchased prior			
\$		TOTAL FEES - payment due at time permit is issued; includes BBS fees. reference: <u>Building & Zoning Fee Schedule</u>	INTERNAL USE: PAID ☐ PAYMENT: RECD. BY/DATE:			
\boxtimes	If scope of work is determined to be more extensive than represented on this application, additional fees may be required.					